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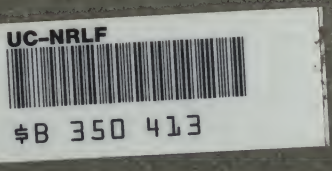

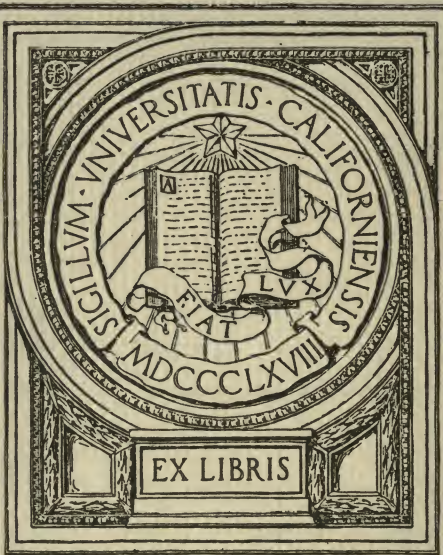
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REATMENT

METHODS EMPLOYED BY ORGANIZED CHARITY IN THE REHABILITATION OF FAMILIES

BY

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THE TREATMENT OF NEEDY FAMILIES BY ORGANIZED CHARITY

ORGANIZED charity, like all forms of social work, should be an effort to help people to lead normal lives. We can best understand just what normal life means by analyzing it into its elements. Without attempting a scientific analysis, we may set up as the irreducible minimum of elements in normal life these five: health, education, employment, recreation, and spiritual development. Even so simple a standard of normal life is not reached by many families, whatever their position in the social scale; and the absence of one or more of these elements does not necessarily mean dependence, but it does mean abnormal life, of which dependence is one form.

If charitable work is an effort to produce these normal life elements in the

712272

families with which it deals, it is necessary to know the process by which this is done. Here we observe at the outset that they cannot be evolved out of the family fiber with no outside aid. In other words, health, education, employment, recreation, and spiritual development all require the co-operation of the family with forces outside its own circle. Health means the laws of sanitation and living, the health regulations of the community, the services of a physician. Education means schools, libraries, and experience in the world of activity and beauty. Employment means the world of industry and commerce. Recreation means public parks and the community's facilities for amusement. Spiritual development means the church, family life, and the whole range of human relationships. Moreover, all these factors act and react upon each other so that a single agency, like the school, becomes a factor not only in education but in health, employment and spiritual development.

Normal life, in the sense in which we have used it, is not possible except through co-operation with these social forces. That family whose co-operation is most intelligent and complete

represents normal life at its best. That family whose co-operation is least intelligent and complete represents abnormal life at its worst; and this condition usually spells dependence. The family co-operation, therefore, or its grip upon these social forces, is the controlling factor in its degree of normality. The center of this co-operation in the normal family is the intelligence and devotion of the parents. In such a family, health is safeguarded by precaution against disease and by prompt, efficient treatment when sickness comes; children go regularly to school and their progress is watched and furthered by interest at home; the family support is secured by the industry of the wage-earning members; and recreation and spiritual development are fostered by participation in the pleasures, church attendance, and activities of wholesome family life. All this becomes possible because of the more or less unconscious co-operation fostered by the family heads.

Unless we are to forsake our original purpose to regard charitable work as an effort to help people lead normal lives, it is evident from this brief study that we must regard dependence as very

much more than a condition of hunger and cold to be cured by food and warmth. Behind the hunger and cold is the absence from the family experience of one or more or perhaps all of the elements in normal life. Those who are dealing constantly with needy families know that hunger and cold are only the surface indication of deeper trouble. Parental ignorance, unwholesome surroundings, exposure to contagion, are a constant danger to health. Children do not go regularly to school, or if they do go, they do not learn because they are suffering from needless physical defects. Uncertain employment means uncertain living with its menace to both health and character. Stolidity, depravity, ignorance, and impassivity are barriers to even those limited spiritual influences which a narrow life may afford.

The fatal defect of "small change" charity which is content with a gift of money or food is that it ministers inadequately to one aspect of need only, and wholly disregards every other aspect. It feeds the poor spasmodically; but it does not help them in any real sense. No treatment which does not reach all the factors in a family's de-

pendence can be called either intelligent or humane. In other words, all the various elements in normal life must be produced in the life of the needy family before it can be lifted out of dependence.

THOROUGH TREATMENT ILLUSTRATED

AS an illustration, showing the contrast between charitable treatment which considers one phase of dependence only, and that which considers all phases, let us consider the case of a widow with five children, an average example of a very common type of charitable problem. Her husband, a day laborer, earning the minimum wage, had died leaving no savings and no insurance, and her application for relief followed a few days later.

The first plan of treatment tried was that of a weekly dole to supplement whatever resource there might be within the family itself. The only possible wage-earner was the woman, the children, with one exception, an infant, being of school age. Later, the woman's sister, a girl of sixteen, entered the household and contributed to the family support. While both were away at

work, the children were cared for by the woman's mother who agreed to render this service, but could not take the whole family to live with her.

This was treatment reaching one sole element in the family life—hunger and cold relieved by the family earnings, supplemented by a weekly dole. After a year, instead of being restored to normal life which should have been the goal of any sound plan of treatment, the family was more dependent than ever, because two other elements, the woman's health and the moral welfare of the children, had been wholly disregarded. Both suffered from the neglect of this ineffective charity.

The problem was then attacked on a far reaching plan, looking toward ultimate independence, although this must be years in the future. The weak points in the family fiber seemed to be the woman's health, the lack of income, the poor school record of the children and their growing waywardness. It was obvious that complete independence could never be worked out until all these conditions had been considered and met, which meant restored health for the woman, regular school attendance and wholesome influence for the

boys, and regular support from charitable sources, supplementing the limited family income, until there were wage-earners enough in the family, as the children became older, to make this unnecessary.

Only the first two features of this plan have been carried out. The woman's health has been restored and she is now the efficient head of her own household, giving to the children regular school attendance, and careful watching, in which she is assisted by an interested friend. It will be two years before there will be income enough in the family to justify the withdrawal of financial charitable support, but there is every evidence that the plan is working out successfully after nearly two years' trial.

In this family, fairly low in the scale of abnormal life when first it applied for help, all but one of the elements of normal life have been produced, either entirely or in part, and this *one*, employment, will appear when the children become old enough to work. In order to produce this result, it has been necessary to effect the co-operation of the family with the following agencies and social forces: a physician, a visiting

nurse, a diet kitchen, a dispensary, a tuberculosis sanitarium, a public school and two of its teachers, two temporary foster homes, a friendly visitor, a relief society, a day nursery, a church, and the woman's own kindred.

If we regard this illustration from the point of view with which we began this paper, it becomes evident that the dependence of this family was due to the failure of its members, for some reason, to co-operate with those social forces which make normal life possible. This brings us to the fundamental and significant task of organized charity which is to organize artificially this co-operation for the family and continue it until the family is once more able on its own account to grip the elements of normal life.

THE DEEPER MEANING OF ORGANIZED CHARITY

IN the remainder of this paper we shall devote ourselves to a discussion of the meaning of organized charity, and the methods which it uses with dependent families, an example of which we have just considered. Organized charity is commonly associated with

a society with a name which is a complete misconception. Charity is neither a society nor an institution. It is the help which individuals bestow upon the needy. Societies are only devices which men have created in order to help them to be charitable more effectively. They are merely channels through which the charity of a community may flow from its people to its poverty, with least waste and with greatest efficiency. Applied to dependent families, charity ought to mean all the various forms of help, outside the family circle, which are necessary to restore the family to normal life. What these forms of help are—school, medical care, relief, wholesome influences, etc.—we have already considered; when they are working harmoniously and effectively to bring about the family independence, we have organized charity. The term means nothing else, and we have no right to use it except as applied to the orderly, cooperative efforts of all the social forces necessary to the wisest and most effective care of the poor.

Organization implies some organizing force, a responsible center for the coordination of effort; implies, in other words, as applied to charity, a center

of the dependent family's co-operation with those resources within and outside its own circle which are essential to independence. Any agency which is fostering this co-operation for a family that has lost its grip upon the elements of normal life is such a center of organization, and is working upon the principles of organized charity, whatever name it bears. Organized charity is no more than this, but let us realize this in sober earnest—it is no less.

The methods of organized charity have become firmly established. If we can avoid the charge of being trite, it may be worth while to consider them from the point of view of co-operation.

The first function of charity is to relieve suffering, and the second is to prevent it. Hence the first task of the charity organizationist is to provide food and fuel to families which are suffering from hunger and cold. When this is done, he is free to take up his larger task of preventing future suffering.

The first step in this larger task is to secure an adequate knowledge of facts. Reverting again to our conception of normal life, we will recall the five elements which are essential to it, and which, in the case of dependent families,

organized charity must develop through the co-operation of social forces with the family resources. It is obvious that we cannot understand how far these elements are missing and how far charity must go in supplementing them without a careful inquiry into the situation. This process we call investigation. The diagnosis of the charity organizationist which he calls an investigation is as necessary in purpose and as kind in method as the physician's investigation which he calls diagnosis; and the two are closely akin. In treating each one of a thousand patients a physician needs to know just what physical defects his patient suffers from, what caused them, how they are related, what there is in his habits of life or family history which will explain them, what resources of vitality and constitutional strength he has to help him, and whether their cure calls for special diet, exercise, a surgical operation, hospital care, change of environment or the use of drugs. Similarly in trying to restore a thousand needy families to normal life, we need to know in each case what elements are missing, what are the more obvious and what are the more deep-seated needs, what caused them, how they are related, what there

is in the family history and habits of life that will explain them, what resources, physical, spiritual, financial, the family have to help them in their rehabilitation, and whether this calls for medical care, education, employment, more wholesome environment, liberal relief or a combination of many of these.

THE NECESSARY BASIS FOR TREATMENT

AN investigation, properly made, will conserve the family self-respect and leave an impression of confidence in the sympathy and resourcefulness of the investigator. The knowledge of facts which it reveals is essential not only as showing the family's own resources but also as showing the weak points in the family fiber toward which charity can direct its efforts. The necessary co-operation of charitable forces can be organized on no other basis. To know what to do and when and where to do it, requires something more than the impressions and preconceived judgments of the doer. It requires as clear a grasp of the situation and the way out as a physician has

of his patient's condition before he begins his treatment.

The facts once gathered, a sound plan of treatment, looking toward the ultimate restoration of the family to normal life, should follow naturally. It will have three chief features. It will consider all the factors in the family dependence and will organize the treatment with reference to them all. It will provide for treatment adequate enough to put the family forever beyond dependence once it is withdrawn, if this is possible. It will make very clear just what social forces are necessary to co-operate in this result and at just what points their co-operation is needed. A dependent family whose needs are studied and treated according to these thorough-going principles, can usually be restored to normal life by organized charity.

It is important to recognize that in many cases these principles cannot be applied, and failure is the result. Leaving out the personal equation, this is due usually to bad social conditions affecting the life or character of the family with which the case-work method cannot cope. Intemperance, preventable disease, and defective school facilities are

illustrations. These are conditions which must be removed by legislation and a higher standard of social ethics, both developed with the aid of public opinion. The experience of those who deal with dependent families, if rightly studied and interpreted, will furnish a basis of fact for these social reform campaigns unrivalled for bald, convincing truth. Considered from the point of view of charity organized to help people lead normal lives, this is as imperative a duty as the relief of the widow and her children.

Health, education, employment, recreation, spiritual development—organized charity means the co-operation of social forces in an effort to bring these elements into the lives of the dependent poor, and to encourage the eradication of those social evils which are daily forcing other families to lose their grip upon normal life.

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